



Atty. Dkt. No. WEAT/0151

361C  
PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of:  
Cameron  
Serial No.: 09/964,034  
Confirmation No.: 9883  
Filed: September 26, 2001  
For: Profiled Recess for  
Instrumented Expandable  
Components

§ Group Art Unit: 3672  
§  
§ Examiner: Halford, B.  
§ Customer No.: 36735  
§

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

CERTIFICATE OF MAILING	
37 CFR 1.8	
I hereby certify that this correspondence is being deposited on <u>March 01</u> with the United States Postal Service as First Class Mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.	
<u>9 March 04</u>	<u>Cameron B. Allen</u>
Date	Signature

Dear Sir:

**RESPONSE TO OFFICE ACTION DATED DECEMBER 10, 2003**

In response to the Office Action dated December 10, 2003, having a shortened statutory period for response set to expire on March 10, 2003, please enter this response and reconsider the claims pending in the application for reasons discussed below. The Commissioner is hereby authorized to charge counsel's Deposit Account No. 20-0782/WEAT/0151/WBP for any fees, including extension of time fees or excess claim fees, required to make this response timely and acceptable to the Office.

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper. Remarks/Arguments begin on page 9 of this paper.

**RECEIVED**

MAR 17 2004

Page 1

242850\_1

**GROUP 3600**

09/28/2004 EKEY11 00000003 200782 09964034

01 FC:1201 344.00 DA  
02 FC:1202 126.00 DA

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

WEAT/0151

## CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS	18	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	18 minus 20=	8
INDEPENDENT CLAIMS	, minus 3 =	5
MULTIPLE DEPENDENT CLAIM PRESENT	<input type="checkbox"/>	

\* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY TYPE	OTHER THAN OR SMALL ENTITY	
	RATE	FEES
OR	BASIC FEE	355.00
OR	BASIC FEE	710.00
OR	X\$ 9=	
OR	X\$18=	
OR	X40=	
OR	X80=	
OR	+135=	
OR	+270=	
OR	TOTAL	710

## CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Minus	.. 20	- 10
Independent	3	Minus	.. 3	= 0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	<input type="checkbox"/>			

SMALL ENTITY	OTHER THAN OR SMALL ENTITY	
	RATE	ADDI- TIONAL FEE
OR	X\$ 9=	
OR	X\$18=	150.00
OR	X40=	
OR	X80=	
OR	+135=	
OR	+270=	
OR	TOTAL ADDIT. FEE	150.00

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Minus	.. 30	= 4
Independent	4	Minus	.. 3	= 1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	<input type="checkbox"/>			

ADDITIONAL FEE	RATE	ADDI- TIONAL FEE
	OR	X\$18=
X\$ 9=		20.00
X40=		80.00
+135=		
OR	TOTAL ADDIT. FEE	150.00

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	Minus	.. 34	- 7
Independent	8	Minus	.. 4	= 4
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	<input type="checkbox"/>			

ADDITIONAL FEE	RATE	ADDI- TIONAL FEE
	OR	X\$18=
X\$ 9=		20.00
X40=		80.00
+135=		
OR	TOTAL ADDIT. FEE	150.00

3/2/04

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.